



### **Episode 8: Let's Chat! Advice Panel**

[0:00] Dr. Lindsey Negrete introduces the episode and Stanford R2 Dr. Jen Padwal

[2:00] "How can I improve my speed while maintaining accuracy in my reports?"

1. Dr. Negrete (Body attending): Preview the case as much as possible while images are transferring to avoid wasting time. Focus on the clinical question from the start.
2. Dr. William Hong (Body fellow): Develop a good search pattern and using it consistently. While pressure is good, do not sacrifice speed by cutting corners.
3. Dr. Komal Chughtai (Body fellow): Speed will come with time. Prioritize accuracy early in training. Learn to triage the study. Increase in volume will help improve speed.
4. Dr. Aman Khurana (Body attending): Do not sacrifice accuracy for speed. Stick to search pattern. Know your weaknesses. Learn from your hard cases.
5. Dr. Luyao Shen (Body attending): Focus on what is clinically relevant. Synthesize all relevant findings to think about diagnosis that can explain them. Not every subcentimeter mesenteric lymph node needs to be measured. Take the time to review missed findings to prevent future mistakes.

[13:43] "In this era of virtual readouts, how can I maintain an efficient learning environment with my attendings while maximizing my own learning opportunities?"

1. Dr. Hong: Use lots of numbers and arrows to replicate in person readouts as much as possible. Generally for readouts, take the initiative to ask questions to help faculty teach as well.
2. Dr. Chughtai: Focus yourself by removing any distractions during the readout. Communicate with attending on their pace of teaching. Zoom allows for attending to control the screen and create drawings, which can make the experience more interactive.
3. Dr. Khurana: Use the annotate feature. Keep eyes on Zoom screen while taking notes. Take a moment to recap after readout to recognize 1) anatomy that was focused on 2) what you missed 3) what you nailed.
4. Dr. Shen: Recognize the trainees learning style. For independent learners, a more hands-off approach can be effective. They should take the effort to speak up on their comfort level with the case. For more dependent learners, trying to replicate an in-person readout as much as possible is important. For R1s, knowing anatomy and developing a search pattern is important and should be reviewed. For attendings, pre-reading before zooming with the trainee may be helpful for both individuals. For trainees, don't be afraid to be upfront about your needs and learning.

[23:24] "How can I efficiently handle/navigate complex inpatient cases while on call?"

1. Dr. Khurana: Gather the appropriate and relevant clinical history. Search pattern can then be adjusted for each patient. Know surgical history and anastomoses. Beware for "satisfaction of search" errors in these cases.
2. Dr. Shen: Find finding systematically, and step back to look for the big picture. Stay clinically relevant. Oncology volume can be high and complex, but stick to the foundations.
3. Dr. Negrete: Know what to look for. Especially at Stanford with highly complex, cutting-edge procedures and cases, knowing the history is key.

THANK YOU! For questions, comments, concerns....letsreadout@gmail.com

